

IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

TERENCE CRAWLEY, plaintiff
v.

S. Felix, in his official capacity as Captain,
Vicki Moser, in her official capacity as Warden

SUMMONS

Civil Action No. 3:20-cv-241

TO THE ABOVE NAMED DEFENDANTS:

You are hereby summoned and required to serve upon plaintiff, whose address is: Terence Crawley # 14192-084, FCI Loretto, P.O. Box 1000, CRESSON, PA 16630-1007 an answer to the complaint which is herewith served upon you, within 20 days after service of this summons upon you, exclusive of the day of service, or 60 days if the U.S. Government or its officer/agent thereof is a defendant. If you fail to do so, judgement by default will be taken against you for the relief demanded in the complaint.

Clerk of the Court

Date: 12/6/2020

Date: 12/6/2020

Court of the Court

taken against you for the relief demanded in the complaint.
Therefore is defendant. If you fail to do so, judgment by default will be
of the day of service, or 60 days if the US Government or officer/agent
you, within 20 days after service of this summons upon you, exclusive
16630-1007 an answer to the complaint which is here with service upon
is : Terence Cravley # 14192-084, FBI Corr-fb, PO Box 1006, Crosson, PA
you are hereby summoned and required to serve upon Plaintiff, whose address

TO THE ABOVE NAMED DEFENDANTS:

Vicki Moser in her official capacity as Warden

S. Falik, in his official capacity as Captain

SUMMONS

Terence Cravley, Plaintiff

FOR THE WESTERN DISTRICT OF PENNSYLVANIA

IN THE UNITED STATES DISTRICT COURT

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF TERENCE CRAWLEY	COURT CASE NUMBER 3:20-CV-248
DEFENDANT Vicki Moser in her official capacity as Warden	TYPE OF PROCESS Service of Complaint / Summons
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN	
SERVE { Vicki Moser, 772 Saint Joseph st.	
AT { ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) Loretto, PA 15940	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	
<input checked="" type="checkbox"/> Terence Crawley #14192-084 FCI Loretto P.O. Box 1000 Cresson, PA 16630-1007	
<input type="checkbox"/> Number of process to be served with this Form 285 <input type="checkbox"/> Number of parties to be served in this case <input type="checkbox"/> Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold FCI Loretto P.O. Box 1000 Cresson, PA 16630-1007 (mailing address)	772 Saint Joseph st. Loretto, PA 15940 (physical address)	FCI Loretto Rural Route 276 Loretto, PA 15940 (delivery address)	Fold
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Signature of Attorney other Originator requesting service on behalf of: Dan D. Crib	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER n/a
DATE 12/6/2020		

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (*See remarks below*)

Name and title of individual served (<i>if not shown above</i>)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
	Date _____ Time _____ <input type="checkbox"/> am <input type="checkbox"/> pm
Signature of U.S. Marshal or Deputy	

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount tendered to U.S. Marshal or Deputy (Amount Left Remaining)
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REMARKS.

PRINT 5 COPIES: 1. CLERK OF THE COURT

2. USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT* To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal

5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service

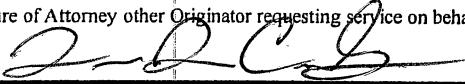
PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	COURT CASE NUMBER		
TERENCE CRAWLEY	3:20-cv-248		
DEFENDANT	TYPE OF PROCESS		
S. Felix in his official capacity as Captain	Service of Complaint/Summons		
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN			
SERVE { S. Felix, 772 Saint Joseph St.			
AT { ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	Loretto, PA 15940		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW			
<input checked="" type="checkbox"/> Terence Crawley #14192-084 FCI Loretto P.O. Box 1000 Cresson, PA 16630-1007		Number of process to be served with this Form 285 Number of parties to be served in this case Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold	FCI Loretto P.O. Box 1000 Cresson, PA 16630-1007 (Mailing Address)	772 Saint Joseph St. Loretto, PA 15940 (Physical Address)	FCI Loretto Rural Route 276 Loretto, PA 15940 (Delivery Address)	Fold
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Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT	N/A	12/6/2020

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
		No. _____	No. _____		

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

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Name and title of individual served (<i>if not shown above</i>)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (<i>complete only different than shown above</i>)	Date	Time
	<input type="checkbox"/> am	<input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy	

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount allowed to U.S. Marshal (See Remarks above)

REMARKS.

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5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285

Rev. 12/15/80

Automated 01/00